

PART B - FEE(S) TRANSMITTAL

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Alexandria, Virginia 22313-1450
or Fax (703) 746-4000**

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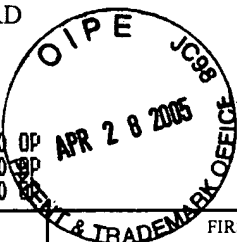
26122

7590

01/28/2005

LAW OFFICES OF GARY R. STANFORD
330 W OVERLOOK MOUNTAIN RD
BUDA, TX 78610

1400.00 DP
300.00 DP
6.00 DP



05/02/2005 SZENDIE2 00000007 10666410

01 FC:1501
02 FC:1504
03 FC:8001

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/666,410	09/19/2003	Mark A. Webster	INSL:0076	7453

TITLE OF INVENTION: ON-SIGNAL QUADRATURE MODULATOR CALIBRATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	04/28/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
BUI, BRYAN	2863	702-107000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Hunton & Williams, LLP

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

GLOBESPANVIRATA, INCORPORATED

RED BANK, NEW JERSEY 07701

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies _____

- ☒ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date April 28, 2005Typed or printed name Phillip Mancini/Kevin DuncanRegistration No. 46,743/41,495

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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FEE TRANSMITTAL

MAIL STOP ISSUE FEES

Complete If Known

Application No.		10/666,410		
Filing Date		September 19, 2003		
First Named Inventor		Mark A. Webster et al.		
Examiner Name		Bryan Bui		
Group Art Unit		2863		
Total Amount Of Payment (\$)		1706.00		
Attorney Docket No.		56162.000595		
METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)		
1. <input type="checkbox"/> The Commissioner for Patents is hereby authorized to charge indicated fees and credit any over payments to Deposit Account No. 50-0206 in the name of Hunton & Williams LLP.		3. ADDITIONAL FEES		
2. <input checked="" type="checkbox"/> Check Enclosed. The Commissioner for Patents is hereby authorized to charge any variance between the amount enclosed and the Patent Office charges to Deposit Account No. 50-0206 in the name of Hunton & Williams LLP, 1900 K Street, N.W., Suite 1200, Washington, D.C. 20006-1109.		Fee Description		Fee Paid
		<input type="checkbox"/> Surcharge - late filing fee or oath		\$
		<input type="checkbox"/> Surcharge - late provisional filing fee or cover sheet		\$
		<input type="checkbox"/> _____ Month Extension of Time		\$
		<input type="checkbox"/> Notice of Appeal		\$
		<input type="checkbox"/> Filing Brief in Support of Appeal		\$
		<input type="checkbox"/> Request for Oral Hearing		\$
		<input checked="" type="checkbox"/> Utility Issue Fee (or Reissue) (including Publication Fee, if necessary)		\$ 1700.00
		<input type="checkbox"/> Design Issue Fee		\$
		<input type="checkbox"/> Plant Issue Fee		\$
		<input type="checkbox"/> Petition to Commissioner		\$
		<input type="checkbox"/> Petition to Revive (Unavoidable)		\$
		<input type="checkbox"/> Petition to Revive (Unintentional)		\$
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		<input type="checkbox"/> Filing Request for Reexamination		\$
		<input checked="" type="checkbox"/> Other: Additional Patent Copies x 2		\$ 6.00
FEE CALCULATION				
1. BASIC FILING FEE		<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity		
		FEE PAID		
Utility Filing Fee		\$		
Design Filing Fee		\$		
Plant Filing Fee		\$		
Reissue Filing Fee		\$		
Provisional Filing Fee		\$		
2. EXTRA CLAIMS FEES				
CLAIMS AS AMENDED				
For	Number Present	Highest Number Paid For	Extra	Rate
				Large Entity Small Entity
TOTAL CLAIMS		20	0	x \$ x \$
INDEPENDENT CLAIMS		3	0	x \$ x \$
MULTIPLE DEPENDENT CLAIMS				\$ \$
TOTAL EXTRA CLAIMS FEES				\$ 0.00
SUBMITTED BY				Complete (if applicable)
Typed or Printed Name	Phillip D. Mancini for Kevin T. Duncan			Registration No. 46,743 41.495
Signature				Date April 28, 2005